#### UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency Washington, DC 20250 **Notice PM-2335** 

For: FFAS Employees

## 2002 Federal Employees Health Benefits (FEHB) Open Season

John Will .

Approved by: Deputy Administrator, Management

1 Overview

A

**Purpose** This notice announces and provides guidance about the 2002 FEHB open season.

The 2002 FEHB open season will be held from November 11, 2002, through December 9, 2002, for eligible employees.

B National Office Contacts

National Office employees shall use the following table for additional information.

| IF employee needs to  | THEN contact   |
|---|--|
| <ul><li>obtain SF-2809</li><li>obtain a plan brochure</li></ul> | <ul> <li>OPM website at www.opm.gov/insurehealth</li> <li>HRD, Domestic Operations Branch (DOB), Services Group at either:</li> </ul>  |
|   | <ul> <li>202-418-9135</li> <li>202-418-9136</li> <li>Room 6957-South.</li> </ul> Note: Hard copy brochures are not currently available. Headquarters employees will be notified by e-mail once brochures are received. |
| verify enrollment   | HRD, DOB, Services Group at 202-418-9135 or 202-418-9136.  |
| receive policy information                                      | HRD, Performance Management Benefits and Awards Branch (PMBAB) at 202-418-9039 or 202-418-9021, or TDD 202-418-91116.  |

Continued on the next page

| Disposal Date    | Distribution   |
|------------------|--|
| February 1, 2003 | All FAS, FSA, and RMA employees; State Offices relay to County Offices |

#### **Notice PM-2335**

#### 1 Overview (Continued)

 $\mathbf{C}$ 

Field Office Contacts Field Office employees use the following table for additional information.

| IF employee is located in  | THEN contact  |
|--|---|
| <ul> <li>KCAO</li> <li>KCCO</li> <li>KCFO</li> <li>KC-ITSDO</li> <li>KC-ITSTO</li> <li>Research and Development Division, RMA</li> </ul> | KCAO, HRD, Processing Section at 816-926-6225 or TDD 816-926-7440.  |
| FAS overseas employees   | HRD, PMBAB at any of the following:   |
| RMA Regional Offices and Compliance<br>Field Offices   | <ul> <li>Susan Brown at 202-418-9039</li> <li>Darla Hensley at 202-418-9021</li> <li>TDD 202-418-9116.</li> </ul> |
| State and County Office  | State Office, Administrative Division.  |
| APFO   | KCAO, HRD.  |

FFAS employees (excluding overseas employees), may access Employee Express by touch tone telephone or the internet to make open season changes involving FEHB coverage. Transactions are made by the employee using their personal identification number (pin).

Access Employee Express using either of the following methods:

- by touch tone telephone at:
  - 912-757-3086 during work hours
  - 1-800-827-6291 after work hours
- on the internet at www.employeeexpress.gov/.

Continued on the next page

#### **Notice PM-2335**

#### 1 Overview (Continued)

E OMB Notification

Information provided by enrolling in the FEHB program may also be used for computer matching with Federal, State, or local agencies' files to determine whether employee qualifies for benefits, payments, or eligibility in the FEHB program, Medicare, or other Government benefit programs.

#### 2 Eligibility and Effective Dates

## A Actions During Open Season

Eligible employees may take the following actions during FEHB open season:

- unregistered employees may enroll
- enrollee may do any of the following:
  - change from 1 plan or option to another
  - change from self only to self and family
  - elect and waive FEHB-Premium Conversion

**Note:** Refer to Notice PM-2201 for more information on FEHB-Premium Conversion.

- cancel enrollment
- change from family to self only
- make any combination of these change.

Continued on the next page

#### 2 Eligibility and Effective Dates (Continued)

# B

## Temporary Continuation of Coverage (TCC)

Employees who leave Federal employment may be eligible for TCC, unless they are separated for gross misconduct.

TCC is available for up to 18 months for separated employees, and up to 36 months for dependents who lose eligibility as a family member under the employee's enrollment. This includes spouses who lose coverage because of divorce and children who lose coverage because they marry or reach age 22.

TCC enrollees must pay the total plan premium, without a government contribution, plus a 2 percent charge for administrative expenses. There are specific timeframes in which the employees or their dependent must enroll in TCC. For additional information, contact your employing office.

## D Effective Dates of Enrollments and Changes

Use the following table for additional information.

| IF there is a          | THEN the effective date is  |
|------------------------|---|
| premium rate change    | January 12, 2003.   |
| a change in enrollment |   |
| a new enrollment       | January 12, 2003, if the employee is in a pay status for any part of the previous pay period. Otherwise, enrollment will become effective in the pay period after the first pay period in a pay status. |

#### 3 2003 FEHB Guide and Individual Plan Brochures

#### A

## Guide to FEHB Plans for Federal Civilian Employees

A 2003 FEHB Guide provides features of each plan, including the enrollee's share of the bi-weekly premium rates, will be available for employees to review through their employing office. The 2003 FEHB Guide can also be accessed on the internet at www.opm.gov/insure.

The 2003 FEHB Guide will be issued as follows:

- RI-70-1 for nontemporary employees
- RI-70-8 for temporary employees
- RI-70-10 for visually impaired employees.

Continued on the next page

#### **Notice PM-2335**

#### 3 2003 FEHB Guide and Individual Plan Brochures (Continued)

## B Supervisor Action

Supervisors shall provide RI-70-1 or RI-70-8 to employees who are away from the work site in a nonpay or nonduty status.

## C Individual Plan Brochures

After examining the 2003 FEHB Guide, employees interested in enrolling or changing plans should review the individual plan brochures for a complete description of benefits to make an informed decision. Because of the limited quantity of plan brochures received, employees who want to review a specific plan brochure should do either of the following:

- obtain brochures on the internet at www.opm.gov/insure/health
- contact their employing office to obtain a copy of the plan brochure if unable to obtain a plan brochure on the internet.

#### **Notes:** Employees:

- currently enrolled in a health plan will receive a 2003 benefit plan brochure directly from their health plan
- who elect a new health insurance plan will receive a personal copy from the new insurance carrier.

#### D OPM Web Site

The 2003 FEHB Guide (RI-70-1) and all health plan brochures are available on OPM's website at **www.opm.gov/insure/health**. The 2003 FEHB Guide and each brochure are available for downloading and printing.

#### 4 Employee Action

# A Action Required by Employees

Employees must take the following action.

| Step | Action   |
|------|--|
| 1    | Immediately review Exhibit 1 and determine whether to take any further action that will require completing SF-2809 this open season.   |
|      | Note: Exhibit 1 assists employees in identifying nonparticipating plans and other significant plan changes that may affect them.  Employees should review Exhibit 1 to determine if they need to make a health benefits election or change this open season. |
| 2    | Access Employee Express through the internet at www.employeeexpress and process enrollment/change or obtain SF-2809 from the employing office to make any open season election or change.  |
|      | Complete and return SF-2809 to the employing office before COB on December 9, 2002.  |

## B Enrollees Who Continue Their Current Enrollment

Employees who wish to continue their current enrollment **should take no action during this open season.** However, enrollees must enroll in a different plan to continue FEHB coverage 2003, if their plan:

- will not be participating in the FEHB program after December 31, 2002.
- dropped an enrollment area having a separate enrollment code.

**Note:** See Exhibit 1 for a list of plans and codes with significant changes or that are terminating.

## C Continuing FEHB Coverage After Retirement

To continue FEHB coverage after retirement, the employee must have been continuously enrolled, or covered as a family member, under the FEHB program for 1 of the following:

- the 5 years of service immediately preceding retirement
- since first opportunity to enroll
- during all service in which eligible to be enrolled.

# 2003 FEHB Significant Plan Changes

| SECTIO  |  | 10000                  | CONTRACTOR OF THE PARTY OF THE |
|---|--|------------------------|---|
|   | DROPPING OUT OF FEHB   | e health nlans         | during open season will not have health   |
| benefits f  |  | e neamn prans          | during open season will not have nemen  |
| State   | Plan   | Code                   | THE RESERVE OF THE PERSON NAMED IN  |
| CA  | Western Health Advantage   | ISZ.                   |   |
| CO  | Rocky Mountain HMO   | XJ                     |   |
| CT  | Health Net of Connecticut  | DP                     |   |
| IA  | SecureCare of Iowa   | 30                     |   |
| IN  | Welborn HMO  | H3                     |   |
| NY  | Univers Healthcare   | OE.                    |   |
| NY  | Univers Healthcare   | SH                     |   |
| NY  | Health Net of New York   | PD                     |   |
| PA  | KeystoneBlue   | EF                     |   |
| TX  | HMO Blue Texas   | YX                     |   |
| VA  | Healthkeepers  | X8                     |   |
| WI  | Unity Health Plans   | W4                     |   |
| SECTIO  |  | 39.4                   |   |
| State   | nefits for 2003,<br>Plan<br>Actna Health   | Code<br>7L             |   |
|   | 100000000000000000000000000000000000000  |                        |   |
| KY<br>NV  | Actna Health<br>Actna Health   | 7L                     |   |
| NY  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  | 8L                     |   |
| PA  | Actna Health<br>Health Net of PA   | TG 27                  |   |
| SECTIO  | Company of the Compan | 147                    |   |
| CONTRACTOR OF THE PARTY OF THE |  | REAS WITHO             | OUT TERMINATING AN ENROLLMENT   |
| -   |  |                        |   |
| Enrollees   | in the area being dropped who do   | not change h           | callth plans during onen season will have to  |
|   |  |                        | calth plans during open season will have to   |
| travel to   | their plan's remaining service area  |                        | ralth plans during open season will have to<br>dical care in order to receive full benefits   |
| travel to<br>from the   | their plan's remaining service area<br>plan in 2003.   | to obtain me           | dical care in order to receive full benefits  |
| travel to<br>from the<br>State  | their plan's remaining service area<br>plan in 2003,<br>Plan   | to obtain me           | dical care in order to receive full benefits  Counties Dropped  |
| travel to<br>from the<br>State<br>AZ  | their plan's remaining service area<br>plan in 2003.<br>Plan<br>Health Net of Arizona  | Code                   | Counties Dropped Cocceino   |
| travel to<br>from the<br>State<br>AZ<br>CA  | their plan's remaining service area<br>plan in 2003.  Plan  Health Net of Arizona  Actna Health  | Code A7 2X             | Counties Dropped Cococino San Diego   |
| travel to<br>from the<br>State<br>AZ<br>CA  | their plan's remaining service area<br>plan in 2003.<br>Plan<br>Health Net of Arizona  | Code                   | Counties Dropped Cococino San Diego Amador, Colusa, Glenn, Lassen,  |
| travel to<br>from the<br>State<br>AZ<br>CA  | their plan's remaining service area<br>plan in 2003.  Plan  Health Net of Arizona  Actna Health  | Code A7 2X             | Counties Dropped Cococino San Diego Amador, Colusa, Glenn, Lassen, Mariposa, Mendocino, Plumas, Sierra,   |
| travel to<br>from the<br>State<br>AZ<br>CA<br>CA  | their plan's remaining service area plan in 2003.  Plan  Health Net of Arizona  Actua Health  Health Net   | Code<br>A7<br>2X<br>LB | Counties Dropped Cococino San Diego Amador, Colusa, Glenn, Lassen, Mariposa, Mendocino, Plumas, Sierra, Tehama  |
| travel to<br>from the<br>State<br>AZ<br>CA<br>CA  | their plan's remaining service area<br>plan in 2003.  Plan  Health Net of Arizona  Actna Health  | Code A7 2X             | Counties Dropped Cococino San Diego Amador, Colusa, Glenn, Lassen, Mariposa, Mendocino, Plumas, Sierra, Tehama Imperial County, City of Blythe (Riversid  |
| travel to<br>from the<br>State<br>AZ  | their plan's remaining service area plan in 2003.  Plan  Health Net of Arizona  Actua Health  Health Net   | Code<br>A7<br>2X<br>LB | Counties Dropped Cococino San Diego Amador, Colusa, Glenn, Lassen, Mariposa, Mendocino, Plumas, Sierra,   |

Continued on the next page

## **2003 FEHB Significant Plan Changes (Continued)**

| МО  | BlueChoice            | 9G | Adair, Linn, Putnam, Schuyler, Sullivan,<br>Butler, Carter, Ripley, Wayne   |
|-----|-----------------------|----|---|
| II. | PersonalCare HMO      | GE | Edgar, Macon, Montgomery, Morgan  |
| IN  | Advantage Health Plan | 6¥ | Adams, Allen, DeKalb, Gibson,<br>Huntington, Kosciusko, LuGrange, Noble,<br>Porter, Posey, Vanderburgh, Warrick,<br>Wells, Whitley  |
| KY  | Actna Health          | RD | Entire state  |
| MI  | The Wellness Plan     | K3 | St. Clair, Shiawasse  |
| MI  | OmniCare              | KA | Monroe  |
| NV  | Health Plan of Nevada | NM | Lyon, Mineral, and Washoe   |
| OH  | Advantage Health Plan | 6Y | Defiance  |
| OK. | PacifiCare            | 2N | Logan   |
| OH  | Aetna Health          | 7D | Allen, Crawdord, Erie, Hancock, Hardin,<br>Henry, Lucas, Ottawa, Putnam, Sandusky<br>Seneca, and portions of Auglaize, Fulton,<br>Huron, Wood   |
| TX  | HMO Blue Texas        | YM | Arkansas, Ataskosa, Bastrop, Bee, Bell, Bexar, Blanco, Bosque, Brazos, Brooks, Burleson, Burnet, Caldwell, Cameron, Comal, Fayette, Freestone, Gonzales, Guadalupe, Hays, Hidalgo, Hill, Jim Wella, Karnes, Kendall, Kenedy, Kleberg Lee, Leon, Madison, McLennan, Medina, Milam, Navarro, Nucces, Refugio, Robertson, San Patricio, Starr, Travis, Willacy, Williamson, Wilson |

Continued on the next page

## **2003 FEHB Significant Plan Changes (Continued)**

| SECTION PLANS S                           | N 4<br>PLITTING A SERVICE AREA   |                                 |   |
|---|--|---------------------------------|---|
|   | PROTEIN CONTRACTOR OF THE PROPERTY OF THE PROP | ent code she                    | own below should check their plan brochure  |
|   | ine which 2003 code they should be   |                                 |   |
| State                                     | Plan   |                                 | 02) Code (2003)   |
| NY  | Univers Healthcare   | O8                              | KO, 08  |
| (Allogany, t<br>Region (Eri<br>Federal me | Catturangus and Chautauqua counties) will<br>ie, Genesee, Niagara, Orleans and Wyoming   | get a new enr<br>counties) will | nt codes. Univera Healtheare-Sourthern Region<br>oliment code KQ, and Univera Healtheare-Northern<br>extain the current enrollment code Q8. Current<br>is designated as the Southern Region must carroll in |
| FL.                                       | Av-Med   | EM-                             | EM. ML  |
|   | ded Health Plan will split their FEHB contr  |                                 | parate contracts which will result into two<br>consilment code ML, and Av-Med Health Plan -   |
| South Region Section                      |  | tract year 200<br>ecases        | enrollment code ML. Av-Med members in the<br>3 most make a positive election into Av-Med Health   |
| FL.                                       | Health Plan Southeast  | RK                              |   |
| FL.                                       | J M H Health Plan  | 18                              |   |
| MT  | New West Health Plan   | NV                              |   |
| PR  | Humana Health Plans (POS)  | ZJ                              |   |
| SECTION<br>SERVICE<br>State               | E AREA EXPANSIONS WITHOUT  | NEW ENR                         | COLLMENT CODES<br>Counties Added  |
| II.                                       | Union Health Service   | 76                              | Kane, Kendall, Will   |
| IN  | Physicians Health Plan   | DQ                              | Elkhart   |
| II.                                       | Health Alliance  | FX                              | DeKalb, Adams, Brown, Pike, LaSalle,<br>Grundy, Kendall (Note: The counties of<br>Hancock and Schuyler will be moved from<br>the Macomb service area to the Quincy  |
|   |  |                                 | service area)   |
| H.  | BlueChoice   | 9G                              | service area)<br>St. Clair, Madison   |
|   | BlueChoice<br>Fallon Community Health Plan   | 9G<br>JV                        | St. Clair, Madison  |
| IL<br>MA<br>MO                            |  | 1000                            | St. Clair, Madison  Amesbury, Erving, Groveland, Merrimac, New Salem, Salisbury, Newbury, Newburyport, West Newbury, Warwick,   |
| MA  | Fallon Community Health Plan   | JV                              | St. Clair, Madison  Amesbury, Erving, Groveland, Merrimac, New Salem, Salisbury, Newbury, Newburyport, West Newbury, Warwick, Wendell  Andrew, Carroll, Gentry, Grundy, Livingston, Pettis                  |
| MA<br>MO                                  | Fallon Community Health Plan  Coventry Health Care of Kansas   | JV<br>HA                        | St. Clair, Madison  Amesbury, Erving, Groveland, Merrimac, New Salem, Salisbury, Newbury, Newburyport, West Newbury, Warwick, Wendell  Andrew, Carroll, Gentry, Grundy,                                     |

Continued on the next page

# 2003 FEHB Significant Plan Changes (Continued)

| NY  | MVP Healthcare  | MX   | Sullivan   |
|---|---|--|--|
| ОН  | Blue HMO demonty Health Maintenance<br>Plant  | R5   | Remainder of the following counties:<br>Ashtabula, Darke, Highland, Logan,<br>Madison, Sandusky, Van Wert. They will<br>add the following counties: Adams,<br>Auglaize, Belmont, Crawford, Guernsey,<br>Hardin, Hocking, Knox, Marion, Mercer,<br>Morrow, Muskingum, Perry, Pike,<br>Richland, Ross, Scioto, Wyandot |
| PA  | UMPC  | 8W   | Erie, Crawford, Warren, McKean, Mercer<br>Vennngo, Forest, Elk, Cameron,<br>Lawrence, Butler, Armstrong, Jefferson,<br>Clearfield, Beaver, Allegheny, Indiana,<br>Cambria, Blair, Washington,<br>Westmoreland, Greene, Fayette, Somerset<br>Bedford, Clarion   |
| PA  | Health America  |  | 26 Crawford, Eric, Forrest, Venango, Warren  |
| UT  | Altius Health Plan  | 9K   | Expanding into the remainder of Sanpete<br>County  |
| WA  | Kitsap Physicians Service   | VT   | King County  |
| VA.   | MD-IPA  | 3P   | Culpeper, Greene, Madison, Wise, City of<br>Norton   |
| WI  | Dean Health Plan  | WD   | Green, Juneau, Vernon  |
| SECTION   | 17  | NO.  | Green, Juneau, Vernan  |
| SECTION<br>PLAN NA<br>State   | ME CHANGES<br>Plan Name (Old)   | Code   | Plan Name (New)  |
| SECTION<br>PLAN NA<br>State<br>OH   | ME CHANGES Plan Name (Old) Health Maintenance Plan  | Code<br>R5   | Plan Name (New)<br>Blue HMO  |
| SECTION<br>PLAN NA<br>State<br>OH   | ME CHANGES Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY   | Code   | Plan Name (New) Blue HMO Univera Healthcare  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY   | ME CHANGES Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Aetna U.S. Healthcare, Inc.   | Code<br>R5   | Plan Name (New)<br>Blue HMO  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION  | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Aetna U.S. Healthcare, Inc.  | Code<br>R5<br>Q8   | Plan Name (New) Blue HMO Univera Healthcare Aetna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D   | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actua U.S. Healthcare, Inc. 8 ROPPING A POINT OF SERVICE   | Code<br>R5<br>Q8   | Plan Name (New) Blue HMO Univera Healthcare Aetna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State  | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actus U.S. Healthcare, Inc. ROPPING A POINT OF SERVICE Plan  | Code<br>R5<br>Q8<br>PRODUC<br>Code                                       | Plan Name (New) Blue HMO Univera Healthcare Aetna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV  | ME CHANGES Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actna U.S. Healthcare, Inc. 8 ROPPING A POINT OF SERVICE Plan Health Plan of Nevada   | Code<br>R5<br>Q8   | Plan Name (New) Blue HMO Univera Healthcare Aetna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION                                       | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actna U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada   | Code<br>R5<br>Q8<br>PRODUC<br>Code                                       | Plan Name (New) Blue HMO Univera Healthcare Aetna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION<br>PLANS A                            | ME CHANGES Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actna U.S. Healthcare, Inc. 8 ROPPING A POINT OF SERVICE Plan Health Plan of Nevada   | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM                                 | Plan Name (New) Blue HMO Univera Healthcare Actua Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION<br>PLANS A<br>State                   | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actna U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION  | Code<br>R5<br>Q8<br>PRODUC<br>Code                                       | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION<br>PLANS A<br>State<br>IL             | ME CHANGES Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Aetna U.S. Healthcare, Inc.  8 ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  9 DDING AN OPTION Plan  | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM                                 | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  Option Added Standard Option  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION<br>PLANS A                            | ME CHANGES Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Aema U.S. Healthcare, Inc.  8 ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  9 DDING AN OPTION Plan Humana  | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM                                 | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION<br>PLANS A<br>State<br>IL<br>NY       | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Aema U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION Plan Humana HIP of New York   | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM                                 | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  Option Added Standard Option Standard Option  |
| SECTION<br>PLAN NA<br>State<br>OH<br>NY<br>SECTION<br>PLANS D<br>State<br>NV<br>SECTION<br>PLANS A<br>State<br>IL<br>NY<br>TN | Plan Name (Old) Health Name (NY Aema U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION Plan Humana HIP of New York HealthSpring               | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM<br>Code<br>75<br>51<br>6K       | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  Option Added Standard Option Standard Option Standard Option  |
| SECTION PLAN NA State OH NY SECTION PLANS D State NV SECTION PLANS A State IL NY TN TX OH                                     | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actna U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION Plan Humana HIP of New York HealthSpring Humana Health Plan of the Upper Ohio Valley         | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM<br>Code<br>75<br>51<br>6K<br>UR | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  Option Added Standard Option Standard Option Standard Option  |
| SECTION PLAN NA State OH NY SECTION PLANS D State NV SECTION PLANS A State IL NY TN TX OH Nationwid                           | Plan Name (Old) Health Maintenance Plan Univera Healthcare - WNY Actna U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION Plan Humana HIP of New York HealthSpring Humana Health Plan of the Upper Ohio Valley  APWU   | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM<br>Code<br>75<br>51<br>6K<br>UR | Plan Name (New) Blue HMO Univera Healthcare Actna Health Inc.  Option Added Standard Option Standard Option Standard Option Standard Option  |
| SECTION PLAN NA State OH NY SECTION PLANS D State NV SECTION PLANS A State IL NY TN TX OH Nationwid SECTION                   | Plan Name (Old) Health Maintenance Plan Univera Healthcare - WNY Actna U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION Plan Humana HIP of New York HealthSpring Humana Health Plan of the Upper Ohio Valley  APWU   | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM<br>Code<br>75<br>51<br>6K<br>UR | Plan Name (New) Blue HMO Univera Healthcare Actua Health Inc.  Option Added Standard Option Standard Option Standard Option Standard Option Standard Option  |
| SECTION PLAN NA State OH NY SECTION PLANS D State NV SECTION PLANS A State IL NY TN TX OH Nationwid SECTION                   | Plan Name (Old) Health Maintenance Plan Univers Healthcare - WNY Actna U.S. Healthcare, Inc.  ROPPING A POINT OF SERVICE Plan Health Plan of Nevada  DDING AN OPTION Plan Humana HIP of New York HealthSpring Humana Health Plan of the Upper Ohio Valley  e APWU | Code<br>R5<br>Q8<br>PRODUC<br>Code<br>NM<br>Code<br>75<br>51<br>6K<br>UR | Plan Name (New) Blue HMO Univera Healthcare Actua Health Inc.  Option Added Standard Option Standard Option Standard Option Standard Option Standard Option  |